



EFFECT OF BALA TAILA NASYA IN THE MANAGEMENT OF MANYASTAMBHA: A CASE STUDY

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ABSTRACT

In today's era due to indiscipline life style, stress, skipping meal, irregular and fast-food habits or consumption of alcohol & smoking; many people are suffering from various kinds of diseases and disorders. One of them is *Manyastambha*. Earlier it effected elderly aged people but now it is more common in younger generation specially after 30 years of age. There are various types of treatment in different pathy's but In *Ayurveda Vaat Nashak Chikitsa* and different types of procedures *Nasya*, *Manya basti*, *Seka* and more are mentioned for the management of *Manyastambha*. *Manyastambha* is considered as *Vaat Vyadhi* and many *Acharyas* were mentioned about it. *Acharya Sushruta* mentioned *Manyastambha* as an individual disease and *Acharya Charaka* mentioned it as *Manyagatavaat* but not as an individual disease. *Acharya Charaka* mentioned *Manyagatavaat* under the *Vaat Vyadhi*.

A male patient aged 24-years came to Kamakshi Arogyadham (KAD) OPD with the Complaint of *Manya Pradeshi Shoola*, *Stambha*, *Bhrama*, *Manya se Aunsa Sanchari Vedna* (for 3 years) and *Shirograha* and *Pipalika abhisarpan* (for 1 year) with painful neck movement on both sides. According to Classical symptoms he was diagnosed as *Manyastambha*. It is a degenerative disease of *Jatrugata pradesha* that is considered as *Vaat Nanatmaja Vyadhi* in *Charaka Samhita*. In *Ayurveda Nasya* is mentioned as best treatment for *Urdhvajatrugata Vikar* and *Bala* (*Sida cordifolia*) is mentioned by *Acharya Sushruta* in *Vata Nashaka* drugs. So *Bala Taila Nasya* was given to the patient for the management of *Manyastambha*. 10 drops (*Uttam Matra*) of *Bala Taila* administered in each nostril of patient morning and evening for 7 days. Assessment was done before and after the treatment. The result of this therapeutic protocol is very effective in the patient.

KEYWORDS: NASYA, MANYA, STAMBHA, SHOOL, BALA.

INTRODUCTION:

In present era everybody is running for his or her livelihood. Thus, most of them cannot manage to balance their lifestyle. Due to excessive workload, travelling, undisciplined lifestyle, eating fast food or addiction of alcohol or smoking and especially after 30 years of age. About 66% of adults experience *manya pradeshi shoola* and *stambha* and 5% are highly disabled by neck pain¹. Effects on particular health and causes diseases of joints or locomotor system very often.

There is a clinical term called *Manyastambha* in which back of the neck becomes stiff & rigid along with pain which impaired the movement of neck. *Acharya Sushruta* mentioned *Manyastambha* as an individual disease and its 4 causes i.e., *diva Swapna*, *Vikrut urdhva nirikshana*, *sthana*, *aasana*². In this disease *sterno mastoid* get constricted³ and *Acharya Sushruta* also classified *Manyastambha* in to four types i.e., *vataja*, *aamvataja*, *jannaja*, *aakshhepyukta*⁴. It can be correlated with *torticollis*. According to *Ayurveda* vitiated *vaat dosha* decrease *asthi dhatu* in body thus *asthi dhatu kshaya* occur. According to *Ashraya ashrayi bhava* it is inversely proportion to each other i.e., when *vaat dosha* increases *asthi dhatu* decreases⁵.

According to modern science we can correlate *Manyastambha* with *torticollis*. In modern medicines this condition is managed by NSAID'S, steroids which also causes side effects⁶ but in *ayurveda* it is treated by *panchakarma*, *shaman* and *bruhana chikitsa*. There are various effective procedures of *panchakarma* according to condition of patient and severity of disease like *yog basti*, *manya basti* and *nasya karma* which may be applied on patient for the treatment of *Manyastambha*. *Acharya Charaka* also mentioned the effectiveness of *Nasya karma* and *dhoompaan* in all types of *vaat vyadhis*⁷ and *Acharya Charaka* also mentioned that *Nasya* of *Vaat Nashaka Taila* should be given when *vayu* is vitiated in *bahu* or *shir pradesha*⁸ So, in this study *Bala Taila Nasya* was given to the

patient. In India *Bala* (*Sida Cordifolia*) is one of the most Important, effective and easily available drug. *Bala* has a property to increase the *bala* or strength that's why it is also known as *balya*⁹. *Acharya Charaka* mentioned *bala* in a group of ten drugs which has *balya* activity¹⁰ and *Acharya vagbhat* also mentioned *Bala* in the group of *balya mahakashaya*¹¹ and *Acharya Sushruta* mentioned *Bala* in *sanshaman gana* he also mentioned that *bala* is one of the drug that have *vaat Sanshamak* property¹². *Acharya Charaka* mentioned *Bala Taila* is best for the treatment of *vaat vyadhi*¹³. *Bala* also have some Chemical properties of anti-analgesic & pain suppressant properties due to presence of *ephedrine*.

AIM & OBJECTIVE:

- 1) To study the efficacy of *Bala Taila nasya* in the management of *Manyastambha*.
- 2) To assess the changes in ESR on 1st day of *Nasya* and on 14th day.
- 3) To assess the CRP QUANTITATIVE on 1st day of *Nasya* and on 14th day.

Keywords: BALA TAILA, MANYAGATAVAAT, SHOOLA, STAMBHA, NASYA.

Drug Review:

Acharya vagbhata also included *Bala* in *vaat nashak gana*¹⁴, because of *vaat nashak* properties of *bala* it is mentioned by various *Acharyas* for the treatment of *Vaat Vyadhi*.

1. *Bala*.
2. *Tila Tail*.

Ingredients:

Drug	Family	Latin name	English name	Chemical Composition	Guna	Ras	Vipak	Virya
<i>Bala</i>	Malvaceae	<i>Sida cordifolia</i>	Country Mallow	Ephedrine, Steroid, mucin, KNO ₃	<i>Laghu, Snigdha, picchila</i>	<i>Madhura</i>	<i>Madhura</i>	<i>Sheeta</i>
<i>Tila</i>	Pedaliaceae	<i>Seasamum Indicum</i>	Seasamum	Vit-A, B, C, Ca, Fat	Guru, Snigdha	<i>Madhura, Kashaya, Tikta</i>	<i>Madhura</i>	<i>Ushna</i>

Sop of Nasya:

The procedure of application of *Nasya Karma* includes-

1. *Poorva karma*
2. *Pradhana karma*
3. *Paschat karma*

Poorva Karma:

There are three steps mentioned in *poorva karma* that shall be applied.

- 1) *sambhar sangraha*- all the required materials will be made available at treatment site.
 - 2) *rogi pariksha*- patient will be selected as per inclusion criteria.
 - 3) *aatur sidhataa*-
- Eyes will be covered with **Sterile pads**. After these *Mrudu Abhyanga* with *Tila Taila* and *Mrudu Swedana* by *Nadi Sweda Yantra* will be done at *Manya*, *Skandhas*, *Ubhayhastha* and *Mukhapradesha*.
 - Patient Will be made to lie in supine position with his head tilted downwards from the edge of the table with nostrils pointing to the roof.

Pradhana Karma:

There are three steps in *Pradhana karma* that would follow while doing the *Nasya Karma* of patients. These steps are,

1. *Nasya Daan (as per clinical guide lines)*.
 2. *Nasyottar parichrya* and observation **(as per clinical guide lines)**.
 3. *Nasya vyapad and pratikaar (if necessary)*.
- The palms and sole of the patient are rubbed well with hands.
 - 10 drops of *Bala Taila* will be administer in each nostril of patient.
 - Patient is asked to remain lying in same position for *vaakshatakakala*¹⁵ and spit out the secretions reaching the mouth **(if any)** and not to swallow it.

Paschata karma:

1. *nasyoprant tatkal karniya karma-skandhadi mardana*.
 2. *gandush* with warm water.
 3. *pathyadi nirdesh*.
 4. *nasyottar karma*.
- Patient will be screened and examined for *yog lakshana* of *nasya*.
 - Gentle massage over *hasta*, *skandhadi* will be given.
 - *Dhoompaan* with *vacha* and *haridra dhoomvarti* 3 strokes in each nostril.
 - *Gandusha* - *Gandusha* will be done with warm water.

Patient is advised to avoid polluted air, bath and contraindicated food during treatment.

MATERIAL AND METHOD:

Source of data: patient of either sex diagnosed by *Manyastambha* from the K.A.D OPD. Bala oil is prepared in *Rasshastra* department of GAM&RC. Reference of bala oil is taken from *Gadnigraha Prayogakhandetailadhikara adhyay*¹⁶.

Inclusion & exclusion criteria:**Inclusion criteria:**

- 1) Patients having the classical signs and symptoms of *shoola and stambha* in *manya pradesha*.
- 2) Patients between the age group of 20-60 years.
- 3) Patients of both sexes.
- 4) *NasyaArha* patients.
- 5) Patients willing to take *nasya* treatment and ready for giving written consent will be included.

Exclusion criteria:

- Patients with major disorders that is traumatic, infective and neoplastic con-

ditions of spine will be excluded from the study.

- Patients undergoing other modalities of treatment for *Manyastambha* or other severe illnesses will be excluded.
- Patients of the age below 20 years and above 60 years will be excluded.
- Patients suffering from Nasal polyps, *urdhvagata raktapitta*, tuberculosis, chronic cardiac failure, asthmatic disorders, severe anaemic patients and ischemic heart disease patients are excluded.
- *NasyaAnarha* Patients.
- Those patients not willing for trail and not giving written consent will be excluded.

Study design:

A single label open arm trail clinical study adopted.

Treatment Schedule:

After diagnosis selected patient was treated with *Bala Tail Nasya* 10 drops each Nostril¹⁷ twice a day (morning & evening)¹⁸ for 7 days.

Criteria for assessment:

Improvement in clinical symptoms, score and grading will be given for each symptom According to the severity and Angle of Movement of Neck (Flexion, Extension, right lateral angle & left lateral angle) is measure by goniometer on 1st day and 14th day of study.

Case report:

A male patient aged 24 years came to KAD OPD with c/o *manya pradeshi shoola & stambha* from past 3 years. He has c/o *Manya se auns sanchari Vedna*, *Bhrama* and *sa-kastha kriya* from past 3 years but in past 2 months the severity of symptoms is increased.

History of present illness:

Patient was having present complaints from past 3 years and he also taken modern medicines but he did not get relief in symptoms, so patient come to KAD OPD for further treatment.

Past history:

No history of HTN/TSH/DM.

No history of any other major illness or surgical incidents.

No history of any trauma or accident.

Personal history:

Aahara: 1) *guru, Ruksha, sheeta, amla rasa Pradhana aahara* Sevana.

Vihara: 1) working on computer for 7 to 8 hours daily.,

2) *Yaan Yaan gamana* daily for more than 50 km /day.

General examination:

- 1) Condition—Conscious and Afebrile.
- 2) Pulse rate—78/min.
- 3) Blood pressure—124/80 mm/hg.
- 4) Respiratory rate—16/min.
- 5) Weight—68 kg.
- 6) Height—169 cm.
- 7) Palpation—tenderness

Systemic examination:

- 1) R.S—A.E--B. E—clear.
- 2) C.N.S—Conscious and oriented.
- 3) C.V.S—S1 & S2 Normal, No abnormal sound.
- 4) P/A—Soft, liver kidney, spleen – Not Pulpable.

Prakriti: Vaat-kapha

Koshta: Mradu

Agni: Sama

Satva: Pravara

Sara: Rakt Saar

Ashtavidh pariksha:

- 1) Nadi—78/min.
- 2) Mala—2times/day samyaka.
- 3) Mutra—5-6 times/day samyaka
- 4) Jivha—Sama.
- 5) Shabda—Clear.
- 6) Sparsha—Ushna.
- 7) Druk—Sthir.
- 8) Akruti—Madhyama.

Indriya Parikshan:

- 1) Dhyandriya: Pravara
- 2) Karmendriya: Pravara

Strotas examination:

- 1) Asthivaha Strotas—*manyapradeshi shoola* present.
- 2) Majjavaha Strotas—tingling sensation & numbness in upper limb.

Clinical examination of spine:

- 1) Inspection—no any abnormality was seen.
- 2) Gait—Normal.

Investigation:

- 1) E.S.R
- 2) C.R.PQUANTITATIVE.

Diagnosis & assessment:

Manyagatavaat was diagnosed by classical symptoms like *manyapradeshi shoola* and *stambha*.

Treatment:

Bala Taila nasya 10 Bindu, morning and evening will be given from 1st to 7th day (total 7 days). Then 14th day from the starting 1st day of nasya patient follow-up will be done.

Differential diagnosis:

- 1) Cervical spondylosis.
- 2) Fibromyalgia.
- 3) Arthritis.

Pathya-Apathya:

Pathya— *Shunthi, Ajmoda, mishreya, maricha, saindhava, hingu, Rasana, jeeraka,*

Apathya— *Virrudha anna, shushka mamsa, sem, Guru-vishtambhi padartha, sheetal jalpaan, vaat vardhaka aahara.*

RESULT:

The assessment before and after the completion of treatment shows that there is symptomatic improvement (subjective parameter) shown in table no 1 that done by VAS Scale for pain and same as improvement is shown in table no 2 that scored by grading table for stambha and range of movement is also shown in table number 3 before and after treatment by goniometry that also shows improvement after treatment.

1) Shoola Assessment Table:

Symptoms	Day 01 st	Day 14 th
Shoola	06	00

2) Stambha Assessment Table:

Symptoms	Day 01 st	Day 14 th
Stambha	03	01

4) Range of Movement Scale:

Range of movement of neck will be recorded by the help of goniometer instrument before and after the treatment. There 4 types of movement angles were recorded by the help of goniometer.

1. Cervical flexion angle.
2. Cervical extension angle.
3. Right lateral movement of neck.
4. Left lateral movement of neck.

Day	Cervical Flexion Angle	Cervical Extension Angle	RT Lateral Movement Angle	LT Lateral Movement Angle
01 st	45°	60°	30°	30°
14 th	50°	70°	35°	35°

Objective parameter:

ESR & CRP QUANTITATIVE -- on 1st & 14th day of study

Change in ESR & CRP QUANTITATIVE will be compare before and after the treatment.

Test	Day 01 st	Day 14 th
E. S. R	32 mm/hr	08 mm/hr.
C. R. P	0.5 Mg/L	0.8 Mg/L

DISCUSSION ON BALA TAILA NASYA IN MANYASTAMBHA:

Nasya is best treatment for *Urdhwajatrugata vyadhi*¹⁹. Continuously doing work on computer and *Ruksha, Amla Ras Pradhan aahara* and *yaan yaan gamana* daily may alleviate *vaat dosha* and *guru, sheet bhojan savanna* and working on computer for long time also elevate *kapha dosha* and it can be interpreted in terms of sleeping in *Vikrit aasana* may cause trauma to the cervical region leading to *Manyastambha*. In *Charaka abhigata* in sira also mentioned as one of causes of *Manyastambha*.

As *Acharya Charaka* also mentioned that *Avyakta lakshana* can be taken as a *poorvarupa* in *vaatvyadhi* and commentator *Vijayarakshita* explains the term *avyakta* those symptoms that are not visible or express clearly hence light or infrequent pain on neck region can be taken as *poorvarupa* of *Manyastambha*.

Rupa is necessary for authentic diagnosis of disease in *Ayurveda* classical sign and symptoms of *Manyastambha* are mentioned by *Acharyas* the main of those sign and symptoms are *manyapradeshi shoola* and *stambha* by those classical symptoms we can diagnose it *Manyastambha*. There are not upshaya and *anupshaya* is mentioned in *Manyastambha* by acharyas, so *vaat vyadhi upshaya* and *anupshaya* can be consider in *Manyastambha*. the knowledge of *samprapti* is very important for the treatment of *Manyastambha*. It also helps to understand the pathogenesis of *Manyastambha*. vitiated *vaat dosha* and *kapha dosha* take an *aashraya* in *Manya pradesha* and effecting on *manya Shira* that may cause *Manyastambha*.

MODE OF ACTION OF BALA TAILA NASYA IN MANYASTAMBHA:

10 drops of *Bala Taila nasya* is administrated in each nostril, that *Bala Taila* reached all the regions above the clavicle through facial nerve from *Shringataka Marma*. It nourishes the tissue of that particular area by their *bruhana* effect and also pacify the vitiated *vaat dosha*. *Bala Taila* contains *Bala Panchanga* and *Tila Taila*. By analyzing the drugs of *Bala Taila*, it strengthens and nourishes the body, balances *vaat dosha* and the pacify the *shoola* and *stambha* in *manya pradesha*.

Overall effect of therapy:

During the entire period of therapy there is no adverse effect seen or observed in the patient. Patient got significant improvement statistically and symptomatically.

CONCLUSION:

Asthi-Majja gata vaat is degenerative *vyadhi* so *Shodhana* and *Bruhana* chikitsa is utilized in it. In this review *Bala Taila Nasya* is utilized for *Shodhana* of vitiated *Vata* and *Bruhana* of *Asthi* and *Sandhi*. Patient shows significant relief in manifestations.

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